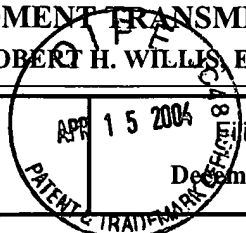
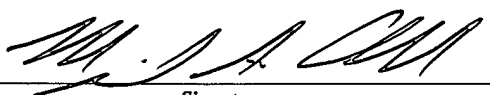


<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b> Applicant(s): <b>ROBERT H. WILLIS, ET AL.</b>				Docket No. <b>BS99-184</b>	
Serial No. <b>09/746,508</b>		Filing Date <b>December 26, 2000</b>	Examiner <b>James A. Kramer</b>	Group Art Unit <b>3627</b>	
Invention: <b>TECHNICIAN COMMUNICATIONS SYSTEM WITH AUTOMATED CLAIMS PROCESSING</b>					
<b><u>TO THE COMMISSIONER FOR PATENTS:</u></b>					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	8 -	17 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	1 -	3 =	0 x	\$84.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					\$0.00
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <input checked="" type="checkbox"/> No additional fee is required for amendment.  <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____  <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.  <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. <b>50-1390</b>  <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.  <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.           </div> <div style="width: 35%; text-align: right;">             Dated: <b>April 15, 2004</b> </div> </div> <div style="margin-top: 20px;"> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">               _____  <i>Signature</i>  <b>Michael A. Oblon, Reg. No. 42,956</b>  <b>SHAW PITTMAN LLP</b>  <b>1650 Tysons Boulevard</b>  <b>McLean, Virginia 22102</b>  <b>(703) 770-7900</b>  <b>MAO/lrhj</b>    <b>Customer No. 28970</b> </div> <div style="width: 50%; border: 1px solid black; padding: 5px;"> <p>I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37C.F.R. 1.8 and is addressed to the for Patents, P.O. Box 1450, ALEXandria, VA 22313-1450.</p> <hr/> <p style="text-align: center;"><i>Signature of Person Mailing Correspondence</i></p> <hr/> <p style="text-align: center;"><i>Typed or Printed Name of Person Mailing Correspondence</i></p> </div> </div> </div>					
CC:					